

PICS Acute Transport Group Flight Tasking Criteria

The objectives of any aeromedical transfer should be the same as that for a road transport:

- To aid the movement of the patient to the right place at the right time for the right care in a timely manner, using the right team and the right resources (mode of transport)
- To maintain open lines of communication between all parties to ensure staff safety as well as effective continuity of patient care
- To ensure that every flight transfer undertaken is risk assessed in a way that maximises patient & staff safety and minimises the risks to the patient and the team.

There are several distinct yet complimentary reasons why aeromedical transport may be considered:

1. Time-critical Team Move (Stabilisation)

The team may need to get to the referring unit quicker than can be achieved by road. This may be required when specialist equipment or personnel are required for patient stabilisation. The team may however return by road with the patient.

2. Time-critical (patient)

The patient may need to get to the receiving unit quicker than can be achieved by road. This may be required when the patient requires definitive emergency treatment within a specific time window, or when the patient's clinical condition requires the journey time to be minimised.

3. Service Provision

Where the distances involved means that the length of time the journey would take by road could place an excessive operational burden on the service. This arrangement reduces the total travel time for the team, and allows the service to use its resources more efficiently.

4. Logistical/Physiological

Journey times have the potential to be extended if the service has to transfer patients out of their normal region for specialist treatment or bed availability. When done by road these journeys can be physiologically demanding for the patients and logistically complex for the service. The repatriation of these patients may also be considered for transport by air.

5. Location

International and overwater transfers are usually always considered for air transport.

Team Rotary Wing Flight:

1. Where the overall journey time is more than 2 hours away by road

Notes: This is specific criteria for use with local HEMS services and may not extrapolate to all regions

Patient Rotary Wing Flight:

- 1. Acute transfer where a time saving would benefit the patient
 - a) The patient road journey time would usually be >90mins
 - b) Factors that must be considered in the calculation of overall time benefit include: time taken to task aircraft, time taken for aircraft and team to rendezvous, location of landing facilities, distance of secondary road transports, loading/unloading times and specific aircraft-type restrictions.
 - c) In taking into consideration the above: it is possible that for some journeys, there will be no time saving unless the patient road journey is over three hours.
- 2. Planned transfer with patient journey > 2hrs
 - d) Factors that must be considered in the calculation of time benefit include location of landing facilities and distance of secondary road transports
- 3. Acute transfer which would allow benefit to the service
 - e) In planning overall service activity the use of flight transfer may help free up the team earlier for other known follow-on jobs, or may encompass a follow-on job in itself. (For example when already tasked to the aircraft and undertaking a flight transfer with another patient, where to return to base and revert to road transport would add a significant delay to the transfer of the waiting patient).
- 4. Planned transfer with significant total mission time
 - f) This is usually applicable for jobs where the outward and return legs are long, but the patient leg is <90mins.

Patient Fixed Wing Flight:

- 1. May consider for patient journey >3hrs when rotary wing not available
- 2. Always consider for patient journey >4hrs

Important Consideration

Just because a journey meets the criteria for flight tasking doesn't mean a flight is always appropriate. There are many clinical and operational contraindications to undertaking a flight transfer.